

WAC 246-976-830 Designation standards for facilities providing level I trauma rehabilitation service.

(1) Level I trauma rehabilitation services shall:

- (a) Treat trauma inpatients and outpatients, regardless of disability or level of severity or complexity, who are fifteen years old or older. For adolescent trauma patients, the service shall consider whether educational goals, premorbid learning or developmental status, social or family needs and other factors indicate treatment in an adult or pediatric rehabilitation service;
- (b) Have and retain accreditation by the commission on accreditation of rehabilitation facilities (CARF) for hospital-based comprehensive inpatient rehabilitation, category one;
 - (i) Abeyance or deferral status from CARF do not qualify an applicant for designation;
 - (ii) If the applicant holds one-year accreditation, the application for trauma care service designation shall include a copy of the CARF survey report and recommendations;
- (c) House patients on a designated rehabilitation nursing unit;
- (d) Provide a peer group for persons with similar disabilities;
- (e) Be directed by a physiatrist who is in-house or on-call and responsible for rehabilitation concerns twenty-four hours every day;
- (f) Have a diversion or transfer policy with protocols on an individual patient basis, based on the ability to manage that patient at that time;
- (g) In addition to the CARF medical consultative service requirements, have the following medical services in-house or on-call twenty-four hours every day:
 - (i) Anesthesiology, with an anesthesiologist or certified registered nurse anesthetist (CRNA); and
 - (ii) Radiology;
- (h) Provide rehabilitation nursing personnel twenty-four hours every day, with:
 - (i) Management by a registered nurse;
 - (ii) At least one certified rehabilitation registered nurse (CRRN) on duty each day and evening shift when a trauma patient is present;
 - (iii) A minimum of six clinical nursing care hours per patient day for each trauma patient;
 - (iv) The initial care plan and weekly update reviewed and approved by a CRRN; and
 - (v) An orientation and training program for all levels of rehabilitation nursing personnel;

- (i) Provide the following health personnel and services twenty-four hours every day:
 - (i) Access to pharmaceuticals, with a pharmacist on-call and available for consultation, with capability to have immediate access to patient and pharmacy data bases, within five minutes of notification;
 - (ii) Personnel trained in intermittent urinary catheterization; and
 - (iii) Respiratory therapy;
- (j) Provide the following trauma rehabilitation services with staff who are licensed, registered, or certified, and who are in-house or available for treatment every day when indicated in the rehabilitation plan:
 - (i) Occupational therapy;
 - (ii) Physical therapy;
 - (iii) Psychology, including:
 - (A) Neuropsychological services;
 - (B) Clinical psychological services, including testing and counseling; and
 - (C) Substance abuse counseling;
 - (iv) Social services;
 - (v) Speech/language pathology;
- (k) Provide the following services in-house or through affiliation or consultative arrangements with staff who are licensed, registered, certified, or degreed:
 - (i) Communication augmentation;
 - (ii) Driver evaluation and training;
 - (iii) Orthotics;
 - (iv) Prosthetics;
 - (v) Rehabilitation engineering for device development and adaptations;
 - (vi) Therapeutic recreation; and
 - (vii) Vocational rehabilitation;
- (l) Provide the following diagnostic services in-house or through affiliation or consultative arrangements with staff who are licensed, registered, certified, or degreed:
 - (i) Diagnostic imaging, including computerized tomography, magnetic resonance imaging, nuclear medicine, and radiology;
 - (ii) Electrophysiologic testing, to include:
 - (A) Electroencephalography;
 - (B) Electromyography;
 - (C) Evoked potentials;

- (iii) Laboratory services; and
- (iv) Urodynamic testing;
- (m) Serve as a regional referral center for patients in their geographical area needing only level II or III rehabilitation care;
- (n) Have an outreach program regarding trauma rehabilitation care, consisting of telephone and on-site consultations with physicians and other health care professionals in the community and outlying areas;
- (o) Have a formal program of continuing trauma rehabilitation care education, both in-house and outreach, provided for nurses and allied health care professionals;
- (p) Have an ongoing structured program to conduct clinical studies, applied research, or analysis in rehabilitation of trauma patients, and report results within a peer review process.

(2) A level I trauma rehabilitation service shall:

- (a) Have a quality assurance/improvement program in accordance with WAC 246-976-881;
- (b) Participate in trauma registry activities as required in WAC 246-976-430;
- (c) Participate in the regional trauma quality assurance program as required in WAC 246-976-910.

[Statutory Authority: Chapter 70.168 RCW. 98-04-038, § 246-976-830, filed 1/29/98, effective 3/1/98; 93-20-063, § 246-976-830, filed 10/1/93, effective 11/1/93.]